

Jul 22 2005 2:33PM

**RECEIVED
CENTRAL FAX CENTER
JUL 22 2005**

1.703.991.7071

P. 1

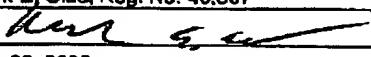
PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/895,152
		Filing Date	Jul 2, 2001
		First Named Inventor	BROWN, David R.
		Art Unit	1756
		Examiner Name	CHACKO DAVIS, DABORAH
Total Number of Pages in This Submission	20	Attorney Docket Number	MEMS-0160-US

ENCLOSURES <i>(check all that apply)</i>			
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	STATEMENT UNDER 37 CFR 3.73(b) <input type="checkbox"/> Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Customer Number 40575 Mark E. Olds, Reg. No. 46,507
Signature	
Date	July 22, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.P. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Type or printed name	Mark E. Olds		
Signature		Date	July 22, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

In you need assistance in completing the form, call 1-800-PTO-9199 (1-800-766-9199) and select option 2.

BEST AVAILABLE COPY

Attorney Docket No.: MEMS-0160-US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): BROWN, et al.	Conf. No.:
Application No.: 09/895,152	Art Unit: 1756
Filed: 2 Jul 2001	Examiner: Chacko Davis, Daborah
Title: HIGH QUALITY LITHOGRAPHIC PROCESSING	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY AND/OR AMENDMENT

Sir:

In response to the Examiner's Advisory Action dated December 2, 2004 the following Amendments and remarks are respectfully submitted in connection with the above-identified application.

Deposit Account Authorization

Please charge any shortage in fees due in connection with the filing of this, concurrent and future replies, including extension of time fees, to Deposit Account 50-3136 and please credit any excess fees to such deposit account.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

BEST AVAILABLE COPY